



WASTEWATER OPERATOR CONTINUING EDUCATION CREDIT REPORT

State Form 51138 (11-02)

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

To ensure proper credit, the
wastewater approval number
MUST be provided.

Training Course Approval Number:

Technical Contact Hours Earned:

General Contact Hours Earned:

INSTRUCTIONS

In accordance with 327 IAC 5-22-17(c), the training provider must submit this form within thirty (30) days of the conclusion of the wastewater treatment continuing education course. Mail the completed form to:

Wastewater Continuing Education Coordinator
Indiana Dept. of Environmental Management
P.O. Box 6015
Indianapolis, IN 46206-6015

- Incomplete forms will be returned to the training course provider for completion and resubmittal to IDEM.
- Partial course credit shall not be given to instructors, speakers, or students participating in less than a complete wastewater treatment continuing education course.
- The training provider must retain a copy of this form for their records for a five (5) year period following the presentation of each wastewater treatment continuing education course.
- Training providers are encouraged to provide a copy of the completed and signed credit reporting form to the certified operator attending the entire wastewater treatment continuing education course.

CERTIFIED OPERATOR INFORMATION

1. NAME:

2. ADDRESS (number and street):

City:

State:

ZIP code:

Telephone number:

Check here if this is an address change _____

COURSE INFORMATION

3. NAME OF TRAINING COURSE:

4. NAME OF ORGANIZATION SPONSORING COURSE:

5. TOTAL NUMBER OF CONTACT HOURS ATTENDED BY CERTIFIED OPERATOR AND VERIFIED BY INSTRUCTOR AND TRAINING COURSE PROVIDER:

Technical Contact Hours:

General Contact Hours:

6. DATE(S) ATTENDED:

7. LOCATION ATTENDED:

8. PRINTED NAME OF INSTRUCTOR:

9. SIGNATURE OF INSTRUCTOR:

10. PRINTED NAME OF CERTIFIED OPERATOR:

11. SIGNATURE OF CERTIFIED OPERATOR:

12. CONTINUING EDUCATION CREDIT HOURS ARE TO BE APPLIED TO:

Operator certification number:

Class:

Expiration date:

Operator certification number:

Class:

Expiration date: